

DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63) 실용 특허 또는 의장 특허 관련 선언 (37 CFR 1.63)	Attorney Docket No. (정리번호)	2230.01
	First Named Inventor (제 1 발명자)	Heungsik Park
	Complete If Known (알려진 경우만 기재)	
	Application Number (출원번호)	
	Filing Date (출원일)	
	Art Unit (기술 분과)	
	Examiner Name (심사관 성명)	

I hereby declare that: (본인은 하기 사항을 선언합니다.)

Each inventor's residence, mailing address, and citizenship are as stated below next to their name.
(각 발명자의 거주지, 우송 주소 및 국적은 이하에서 발명자 성명 다음에 기재된 것과 동일합니다.)

I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:
(본인은 특허를 받기를 희망하는 하기 발명의 주제에 대하여 최초 및 원래의 발명자 (또는 복수의 발명자들) 임을 믿습니다.)

U.V. Sterilizer for Dental Handpiece

Title of the Invention (발명의 명칭)

The specification of which (본발명의 명세서)는

☐ is attached hereto (첨부되어 있습니다.)

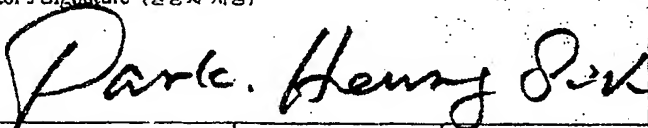
OR (또는)

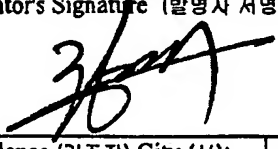
☒ was filed on January 27, 2005 as United States Application Number _____ or
PCT International Application Number PCT/KR2005/000219 and was amended on _____
(if applicable).

(_____ 자로 미국 특허 출원 번호 제 _____ 호, 또는 PCT 국제 출원 번호 _____ 제 _____ 호로 출원되고, _____ 자로 보정되었습니다. (해당할 경우 기재)).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above. (본인은 청구 범위를 포함하는 상기 명세서의 내용을 검토하였으며 이해했음을 확인합니다. 또한 보정이 있었을 경우 보정된 바에 따른 내용을 검토 및 이해했음을 확인합니다.)

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.
(본인은 37 CFR 1.56 에 따른 특허 여부에 관련이 있는 정보의 제공 의무와, 그 의무는 일부 계속 출원에도 적용되고, 관련 정보는 선출원의 출원일과 일부 계속 출원의 미국 출원일 또는 PCT 국제 출원일 사이에 임수가능하게 된 것을 포함하는 것을 인정합니다.)

Declaration – Utility or Design Patent Application 실용 특허 또는 의장 특허 관련 선언				
<p>I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.</p> <p>(본인은 이하에 열거된 특허, 발명자증 또는 식물 품종 개량자의 권리에 대한 외국 출원의 35 U.S.C. 119(a)-(d) or (f), 또는 365(b)의 규정, 또는 미국 이외에 적어도 한 국가를 지정한 PCT 국제 출원의 365(a)의 규정에 따른 외국 우선권을 주장하고, 또한 우선권이 주장된 출원의 출원일 이전에 출원된 특허, 발명자증 또는 식물 품종 개량자의 권리에 대한 외국 출원, 또는 PCT 국제 출원을 해당란에 표시함으로써 확인하였습니다.)</p>				
Prior Foreign Application Number(s) (외국 선출원 번호)	Country (국가)	Foreign Filing Date (MM/DD/YYYY) (외국 출원일)	Priority Not Claimed (우선권 주장 없음)	Certified Copy Attached? (우선권 증명서 첨부) YES (예) NO (아니오)
10-2004-0006422	Republic of Korea	01/31/2004	<input type="checkbox"/>	<input type="checkbox"/> <input checked="" type="checkbox"/>
10-2004-0023796	Republic of Korea	04/07/2004	<input type="checkbox"/>	<input type="checkbox"/> <input checked="" type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
<p>Direct all correspondence to the address associated with Customer Number 29338. (모든 연락은 고객 번호 29338의 주소로 해주시기 바랍니다.)</p>				
<p>I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.</p> <p>(본인은 본인이 아는 한 여기의 모든 진술이 진실이고 모든 진술이 진실로 믿어지는 정보와 믿음에 기초한 것이며, 고의적인 허위 진술 등은 18 U.S.C. 1001에 따라 벌금 또는 감옥형 또는 벌금 및 감옥형 모두에 의해 처벌가능함과 이같은 허위 진술은 출원 또는 후에 발행된 특허의 유효성을 위태롭게 할 수 있음을 인지하고 진술하였음을 이에 선언합니다.)</p>				
NAME OF SOLE OR FIRST INVENTOR (단독 또는 제1 발명자):				
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Declaration - Utility or Design Patent Application 실용 특허 또는 의장 특허 관련 선언			
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Mansu		Jang	
Inventor's Signature (발명자 서명)		Date (서명일)	
		7/27/2006	
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City (시)	State (주)	Zip (우편번호)	Country (국가)

POWER OF ATTORNEY

I hereby appoint the practitioners at Customer No. 29338 as my attorneys or agents to prosecute the United States Letters Patent Application titled:

U.V. Sterilizer for Dental Handpiece

and to transact all business with full power of substitution and revocation in the United States Patent and Trademark Office connected therewith, unless the inventor(s) or assignee(s) provides said practitioners with a written notice to the contrary.


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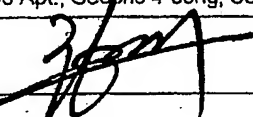
or **Customer No. 29338**

I, the undersigned, declare that I am the owner of the above-mentioned application or, if the owner is a corporation, partnership, or other association, I am authorized to make this appointment on behalf of the owner, and I further declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application of any patent issuing thereon.

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Third Inventor

Given Name	Family Name
Mailing Address	
Signature	Date

Fourth Inventor

Given Name	Family Name
Mailing Address	
Signature	Date